

House _____ Amendment NO. _____

Offered By _____

1 AMEND House Committee Substitute for Senate Committee Substitute for Senate Bill No. 716,
2 Page 2, Section 197.168, Line 9, by inserting immediately after said line the following:

3 "376.1363. 1. A health carrier shall maintain written procedures for making utilization
4 review decisions and for notifying enrollees and providers acting on behalf of enrollees of its
5 decisions. For purposes of this section, "enrollee" includes the representative of an enrollee.

6 2. For initial determinations, a health carrier shall make the determination within [two
7 working days] twenty-four hours of obtaining all necessary information regarding a proposed
8 admission, procedure or service requiring a review determination. For purposes of this section,
9 "necessary information" includes the results of any face-to-face clinical evaluation or second opinion
10 that may be required:

11 (1) In the case of a determination to certify an admission, procedure or service, the carrier
12 shall notify the provider rendering the service by telephone or electronically within twenty-four
13 hours of making the initial certification, and provide written or electronic confirmation of a
14 telephone or electronic notification to the enrollee and the provider within two working days of
15 making the initial certification;

16 (2) In the case of an adverse determination, the carrier shall notify the provider rendering the
17 service by telephone or electronically within twenty-four hours of making the adverse determination;
18 and shall provide written or electronic confirmation of a telephone or electronic notification to the
19 enrollee and the provider within one working day of making the adverse determination.

20 3. For concurrent review determinations, a health carrier shall make the determination within
21 one working day of obtaining all necessary information:

22 (1) In the case of a determination to certify an extended stay or additional services, the
23 carrier shall notify by telephone or electronically the provider rendering the service within one
24 working day of making the certification, and provide written or electronic confirmation to the
25 enrollee and the provider within one working day after telephone or electronic notification. The
26 written notification shall include the number of extended days or next review date, the new total
27 number of days or services approved, and the date of admission or initiation of services;

28 (2) In the case of an adverse determination, the carrier shall notify by telephone or
29 electronically the provider rendering the service within twenty-four hours of making the adverse
30 determination, and provide written or electronic notification to the enrollee and the provider within
31 one working day of a telephone or electronic notification. The service shall be continued without
32 liability to the enrollee until the enrollee has been notified of the determination.

33 4. For retrospective review determinations, a health carrier shall make the determination
34 within thirty working days of receiving all necessary information. A carrier shall provide notice in
35 writing of the carrier's determination to an enrollee within ten working days of making the
36 determination.

Action Taken _____ Date _____

1 5. A written notification of an adverse determination shall include the principal reason or
2 reasons for the determination, the instructions for initiating an appeal or reconsideration of the
3 determination, and the instructions for requesting a written statement of the clinical rationale,
4 including the clinical review criteria used to make the determination. A health carrier shall provide
5 the clinical rationale in writing for an adverse determination, including the clinical review criteria
6 used to make that determination, to any party who received notice of the adverse determination and
7 who requests such information.

8 6. A health carrier shall have written procedures to address the failure or inability of a
9 provider or an enrollee to provide all necessary information for review. In cases where the provider
10 or an enrollee will not release necessary information, the health carrier may deny certification of an
11 admission, procedure or service."; and
12

13 Further amend said bill by amending the title, enacting clause, and intersectional references
14 accordingly.